Letters to the Editor

**Sensationalist Headlines: Also in the Scientific Press?**

**Titulares sensacionalistas: ¿también en la prensa científica?**

To the Editor,

We have read the article “The Risk of Cardiovascular Events After an Acute Coronary Event Remains High, Especially During the First Year, Despite Revascularization” by Abu-Assi et al.1 The authors present an interesting retrospective analysis of a large series of patients; however, we must admit that a strong incentive to read the article was its provocative title, the style of which runs against current trends. For this reason we would like to comment on some of their findings.

The background to the issue lies in the publication of 2 meta-analyses published 5 and 10 years ago, respectively.2,3 The results conclusively showed the clear prognostic benefit of revascularization in patients with acute coronary syndrome. Therefore, all the clinical guideline updates, including the most recent European guidelines, recommend coronary angiography followed by revascularization (level of evidence: A). The guidelines also recommend these procedures in high-risk patients within 24 hours and in intermediate-risk patients within 72 hours. What evidence do the authors provide by which they challenge these recommendations?

Without addressing the limitations acknowledged by the authors, such as the retrospective nature of their article, they draw attention to the predictors of events found in the multivariable analysis. Smoking was the only modifiable factor in the prediction of events during the first year: no other measures, including the use of drugs with known prognostic benefit, were effective in improving prognosis. Similar results were obtained in the long-term analysis. However, the authors were describing a relationship between the absence of revascularization and worse prognosis. It would therefore seem that patients with acute coronary syndrome have a high recurrence of events, that there is no remedy, and that nothing can be done to change this. Since the results failed to identify any of the known effective measures for primary and secondary prevention except, perhaps, to quit smoking, should we surrender to therapeutic nihilism?

Based on these results, we could easily propose many other equally provocative titles for this article. Obviously, a striking title invites one to read the entire article, but we believe an article should be stimulating, rather than sensationalist, overspeculative, or biased. As Ransohoff and Ransohoff wrote, “cases of sensationalized reporting receive, by their very nature, a disproportionate amount of attention. They can also cause a disproportionate amount of disillusionment and distancing of the public.”5

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